



OWNER/AGENCY CERTIFICATION OF ENVIRONMENTAL REMEDIAL ACTION

This Certification must be accompanied by either an Environmental Professional Certification (Rev 41 0061) or a copy of an enforcement order, agreed order, or consent decree signed by the Washington State Department of Ecology or the United States Environmental Protection Agency. On 8 1/2 x 11 paper, please include a copy of the County Assessor's parcel map or a similar map showing the property and surrounding area.

1.	Location of the subject property:			
	Street A	Address City County (se Only		
		Property Tax Parcel Number		
2.	This C	This Certification is provided by:		
Ī		Owner of the subject property		
		Washington State Department of Ecology		
		U.S. Environmental Protection Agency		
3.	The proposed environmental remedial action, as that term is defined in Chapter 308, Laws of 1998, to be conducted upon the subject property is one of the following: (check one box only)			
		Conducted independently and in a manner consistent with the requirements of the Model Toxics Control Act, Chapter 70.105D RCW (MTCA).		
Ĭ		Conducted independently at a designated Superfund site and in a manner consistent with the requirements of the Comprehensive Environmental Response, Compensation and Liability Act, 42 USC 9601et. seq. (CERCLA).		
		Conducted to comply with an enforcement order, agreed order, or consent decree issued by the Department of Ecology pursuant to MTCA.		
		Conducted to comply with an enforcement order, consent order, or consent decree issued by the United States Environmental Protection Agency pursuant to CERCLA.		
		Conducted by the Department of Ecology or its authorized contractor pursuant to MTCA.		
		Conducted by the United States Environmental Protection Agency or its authorized contractor pursuant to CERCLA.		

4.	Briefly describe the environmental remedial action(s) to be taken.			
Under penalty of perjury under the laws of the State of Washington and other penalties prescribed by law, learning that the foregoing information is true and correct.				
	the foregoing mornation is true and correct	•		
S	ignature	Print Name		
T	itle	Date and Place		
A	ddress	Phone Number		
C	ity, State, Zip Code			

Submit one copy of this certification to each agency listed below.

State of Washington, Department of Ecology Attn.: Notice of Environmental Remedial Action Toxics Cleanup Program PO Box 47600 Olympia, WA 98504-7600 (800) 826-7716, **TTY** (360) 407-6006 State of Washington, Department of Revenue Taxpayer Account Administration Micrographics PO Box 47476 Olympia, WA 98504-7476 (800) 647-7706, **TTY** (800) 451-7985

To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 753-3217. Teletype (TTY) users may call (800) 451-7985. You may also access tax information on our Internet home page at http://dor.wa.gov. REV 41 0062-2 (10-29-98)